

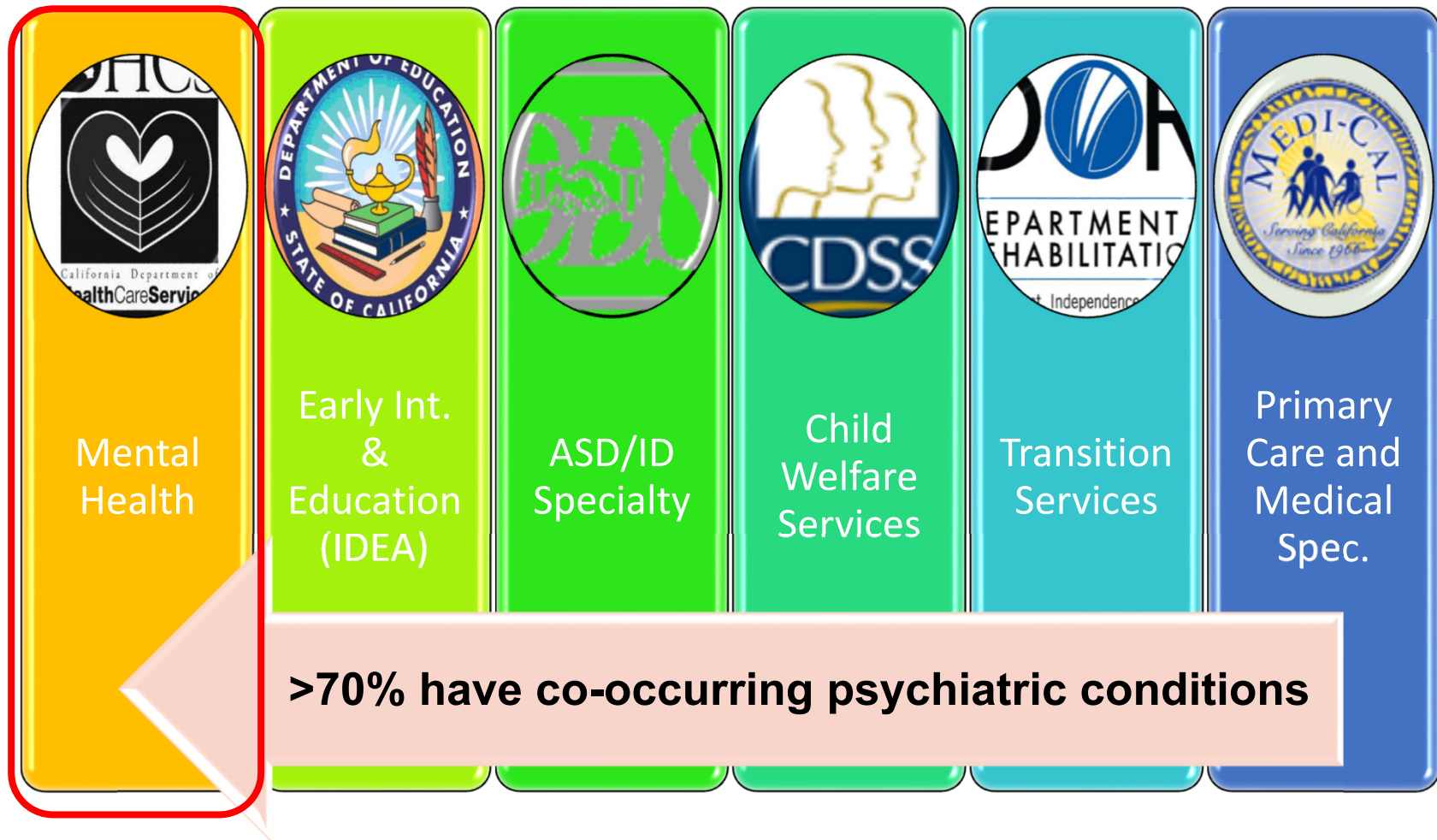
# An Individualized Mental Health Intervention for ASD (AIM HI) in Publicly-Funded Mental Health Services

**Lauren Brookman-Frazee, Ph.D.**

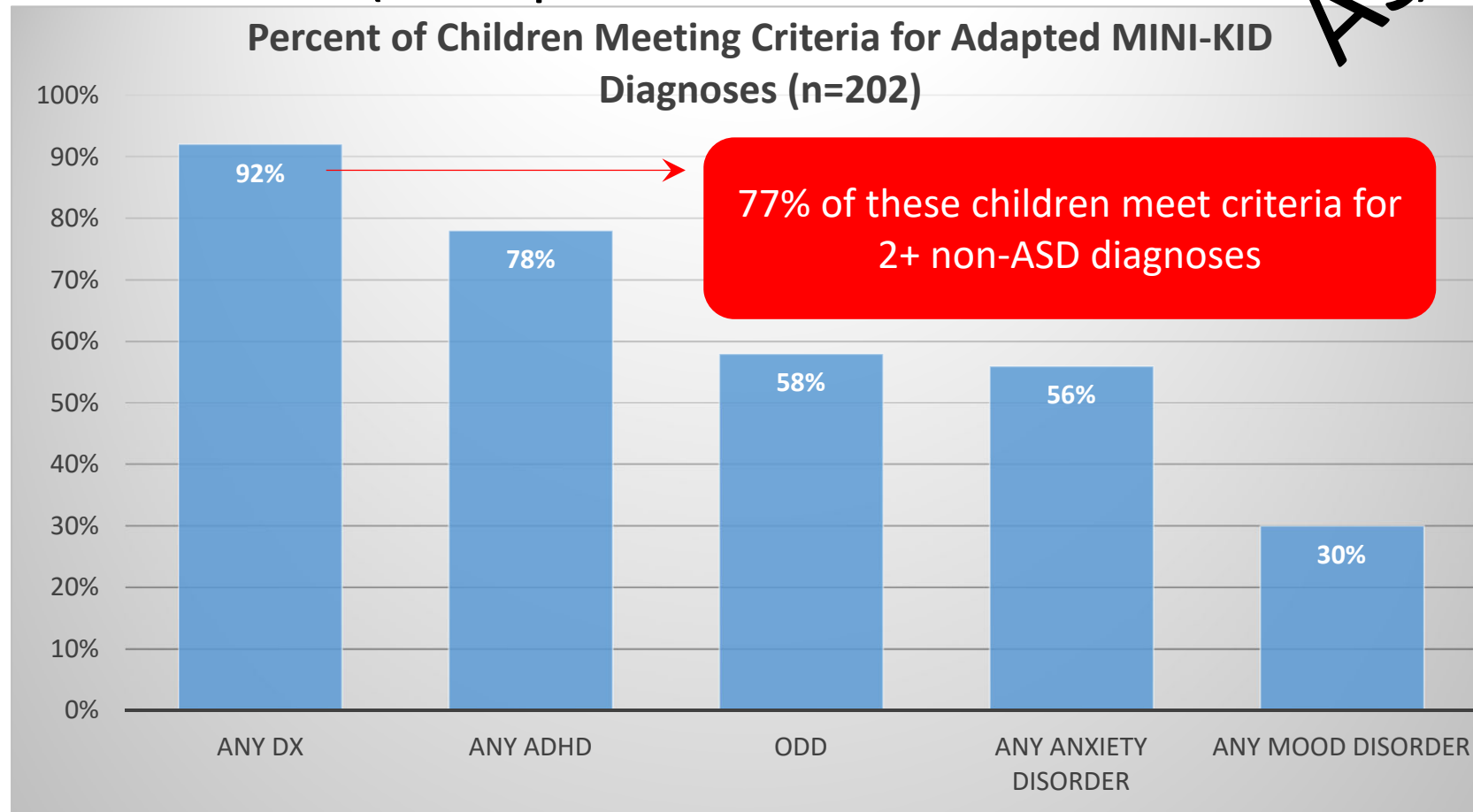
CAPTAIN Summit  
November 6, 2019



# Public Service Systems Caring for Children with ASD: Importance of MH Services



# Psychiatric Conditions in Children Ages 5 to 13 with ASD Receiving MH Services (Outpatient & School-Based)



Brookman-Frazee, L., Stadnick, N., Chlebowski, C., Baker-Ericzen, M., & Ganger, W. (2017). Characterizing psychiatric comorbidity in children with autism spectrum disorder receiving publicly-funded mental health services. *Autism*.

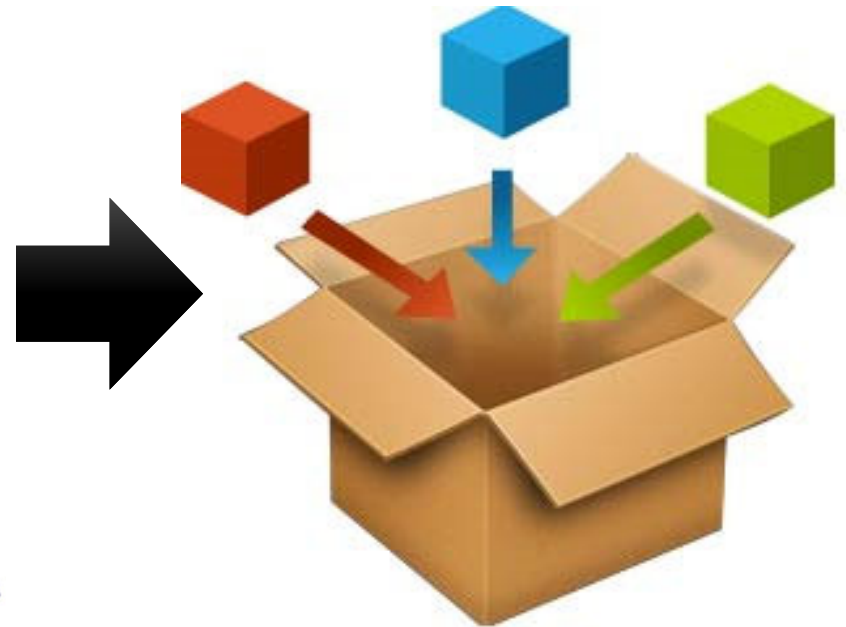
# Community-Identified Needs Related to Caring for Children with ASD



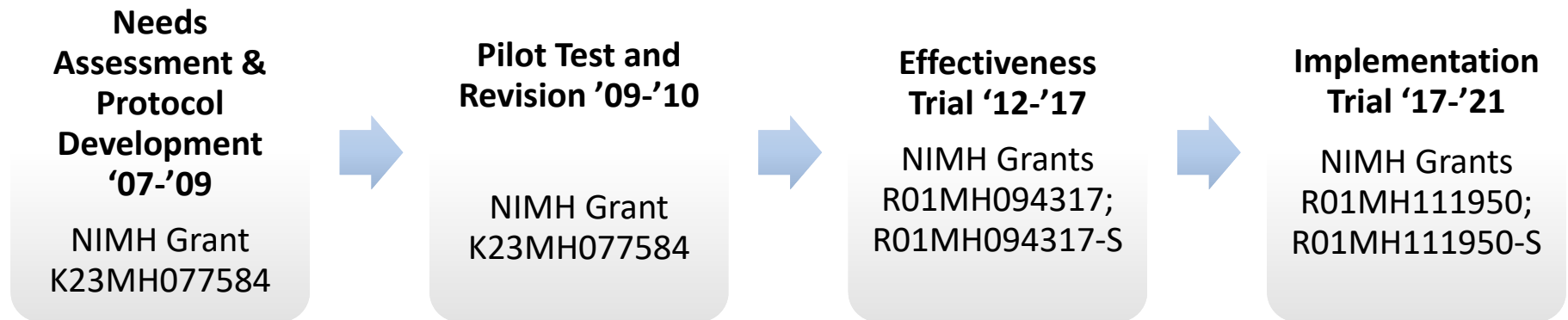
“We’re probably somewhat all out of the scope of practice when we’re dealing with these kids ...we don’t really have a whole lot of training. We’re getting it as we go.”

-Community  
Therapist

# Responding to Need for Scalable ASD Intervention and Training Model for Children's MH Services



# Responding to Community-Identified Needs: Developing and Testing AIM HI





# An Individualized Mental Health Intervention for Children with ASD (AIM HI)

- Package of evidence-based parent-mediated and child focused strategies to reduce challenging behaviors in children with ASD ages 5 to 13 served in MH settings
  - Function-based approach to address challenging behaviors and associated psychiatric comorbid conditions
  - Individual components of intervention are “well established” and recent effectiveness trial shows evidence of full model.

Developed in collaboration with MH providers, families and ASD experts based on assessment of routine care practice, child clinical needs and provider training needs

Designed to be delivered by providers who have limited experience with ASD or behavioral interventions

# AIM HI Process

## Understand

Collect information to identify patterns and functions of behaviors  
Based on multiple observations, determine the most common purpose (function) and situations.

## Plan

Identify child skills that make challenging behaviors non-functional for most common purpose/setting.  
Identify complementary parent strategies that will help facilitate child skill building.

## Teach

Use Active Teaching strategies to teach child and parent skills  
Use additional intervention strategies to target specific skills as appropriate

Co-occurring symptoms addressed within context of addressing challenging behaviors

**Adapting Psychotherapy Process (Structuring Sessions for ASD)**





# AIM HI Process

Understand

Collect information to identify patterns and functions of behavior

Based on multiple observations, determine

site

Plan

Identify

Do

Use Active Teaching strategies to teach child new skills

trial

is

g behaviors

Adapt

essions for ASD)

AIM HI intervention content will be different for each child/ family (i.e. there is no set curriculum or started set of skills)

HAVE  
AUTISM  
WHAT'S YOUR  
SUPER POWER?

# AIM HI Protocol

Phase	AIM HI Protocol Steps	Within-Session Elements
<b>Treatment Planning</b>	Integrate Assessment Information	Structuring sessions for skill-building and engagement <ul style="list-style-type: none"> <li>Schedules, visual/written materials</li> </ul> Engaging parents and children <ul style="list-style-type: none"> <li>Collaboration/active involvement (parents)</li> <li>Motivational strategies (children)</li> <li>Preparing to teach new skills</li> </ul> Active teaching with parents and children <ul style="list-style-type: none"> <li>Modeling, practice-with-feedback, reinforcement, between-session practice</li> </ul>
	Collaborative ASD Psychoeducation	
	Complete Behavior Tracking with Parents	
	Develop Behavior Plan	
	Develop Active Teaching Plan	
<b>Active Teaching</b>	Teach Parent Strategies	
	Teach Alternative Skill(s) to Child	
	Promote Generalization of Alternative Skill(s)	
	Teach Additional Alternative Skills to Child (as indicated)	
<b>Evaluating Progress</b>	Review Treatment Progress	
	Develop Plan for Next Steps	

# Why Focus on Challenging Behaviors?

Types of challenging behaviors

High rates of challenging behaviors

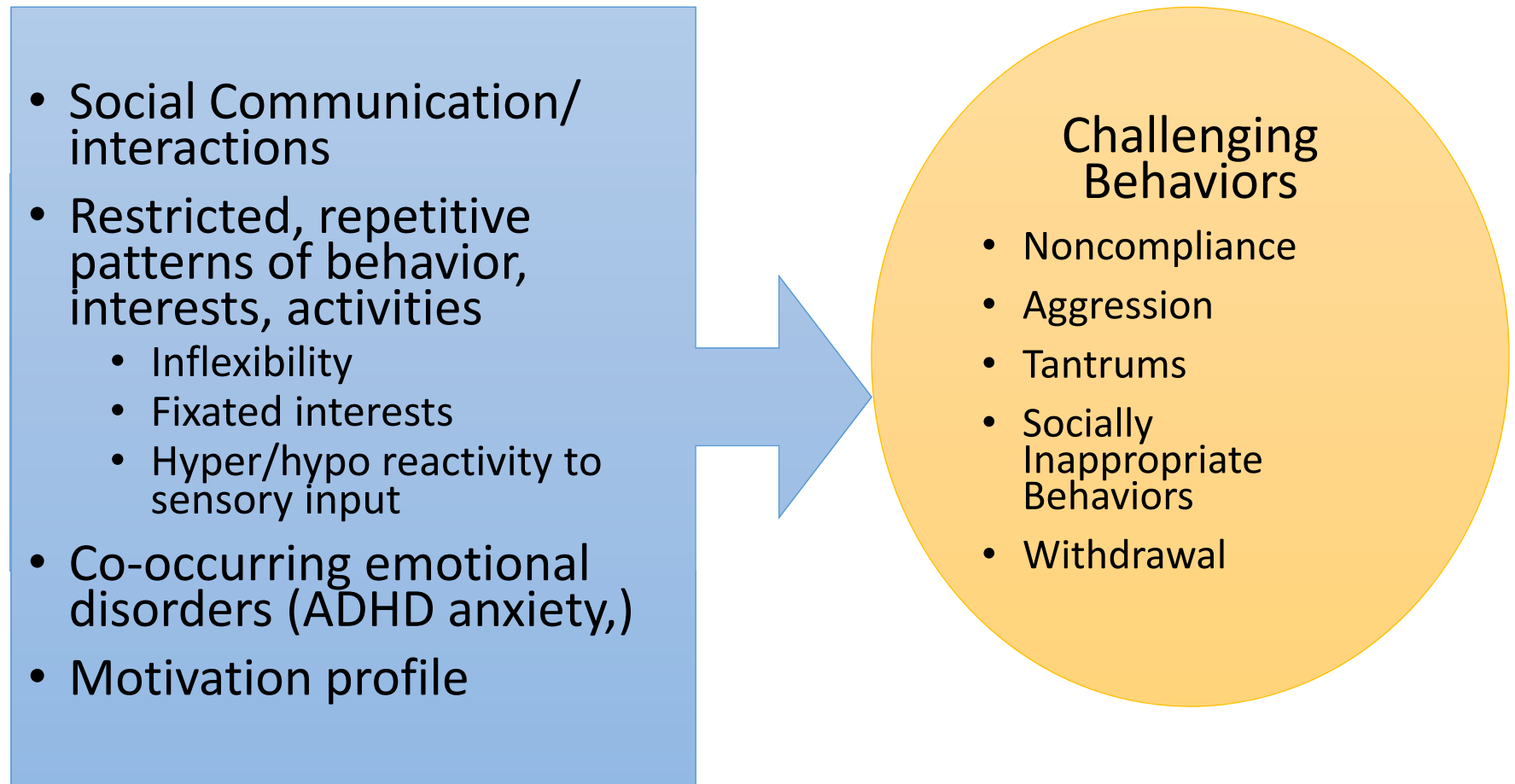
Often displayed symptom of other psychiatric symptoms

Often the most impairing symptoms

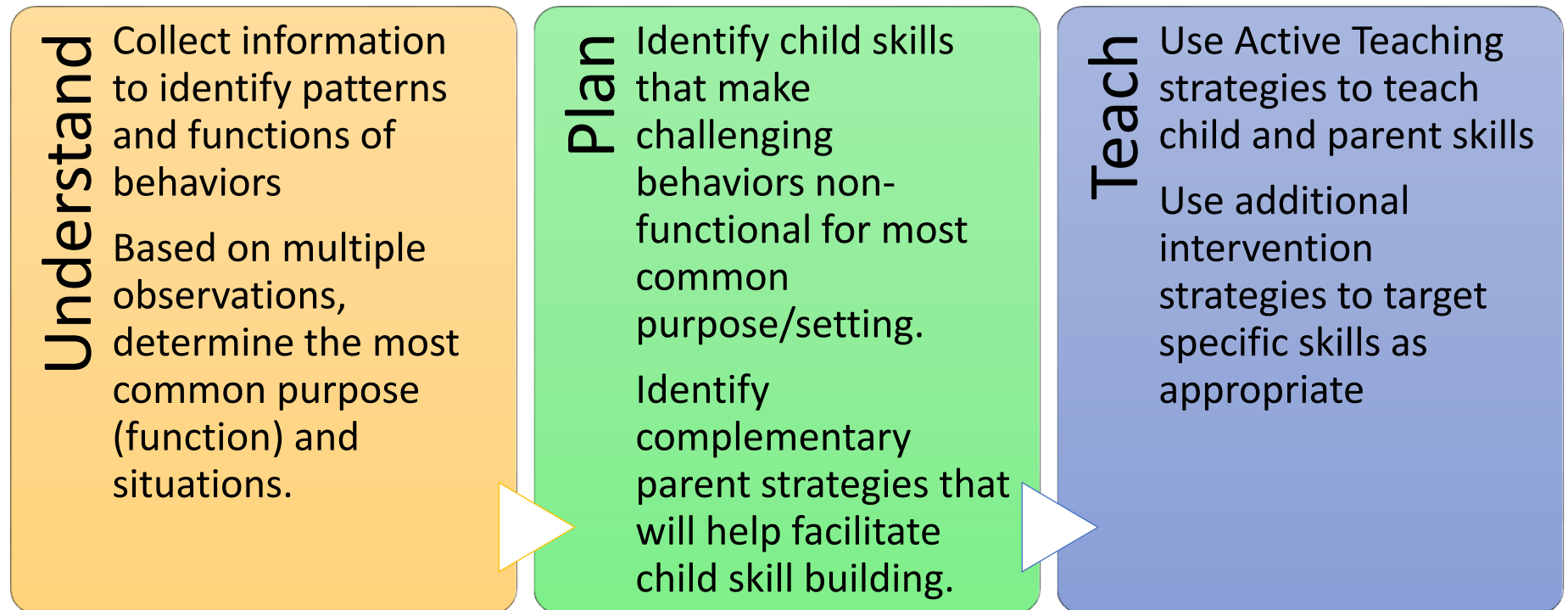
Source of stress for families

Primarily presenting problem in MH services

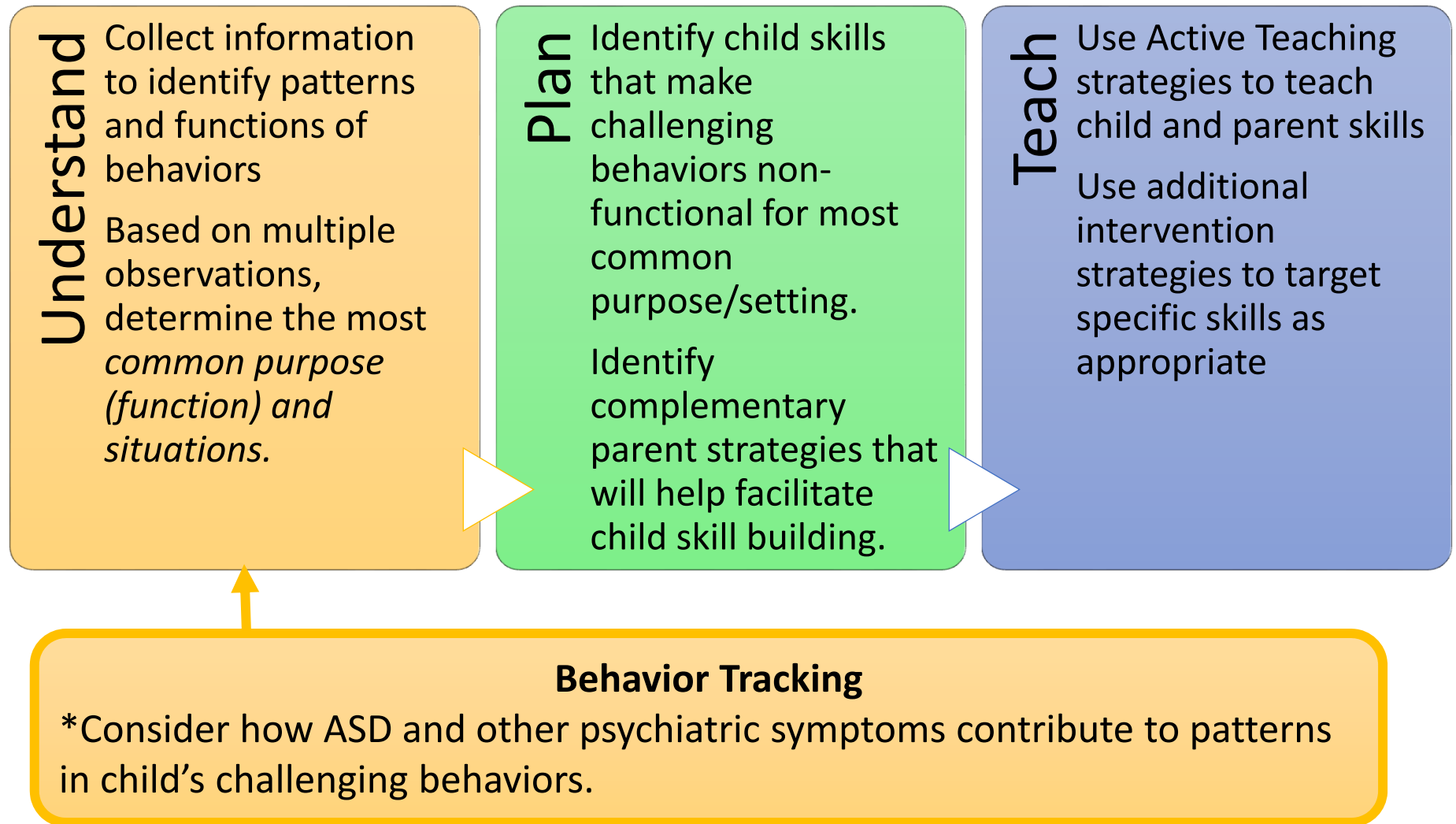
# ASD Characteristics and Influences on Behaviors



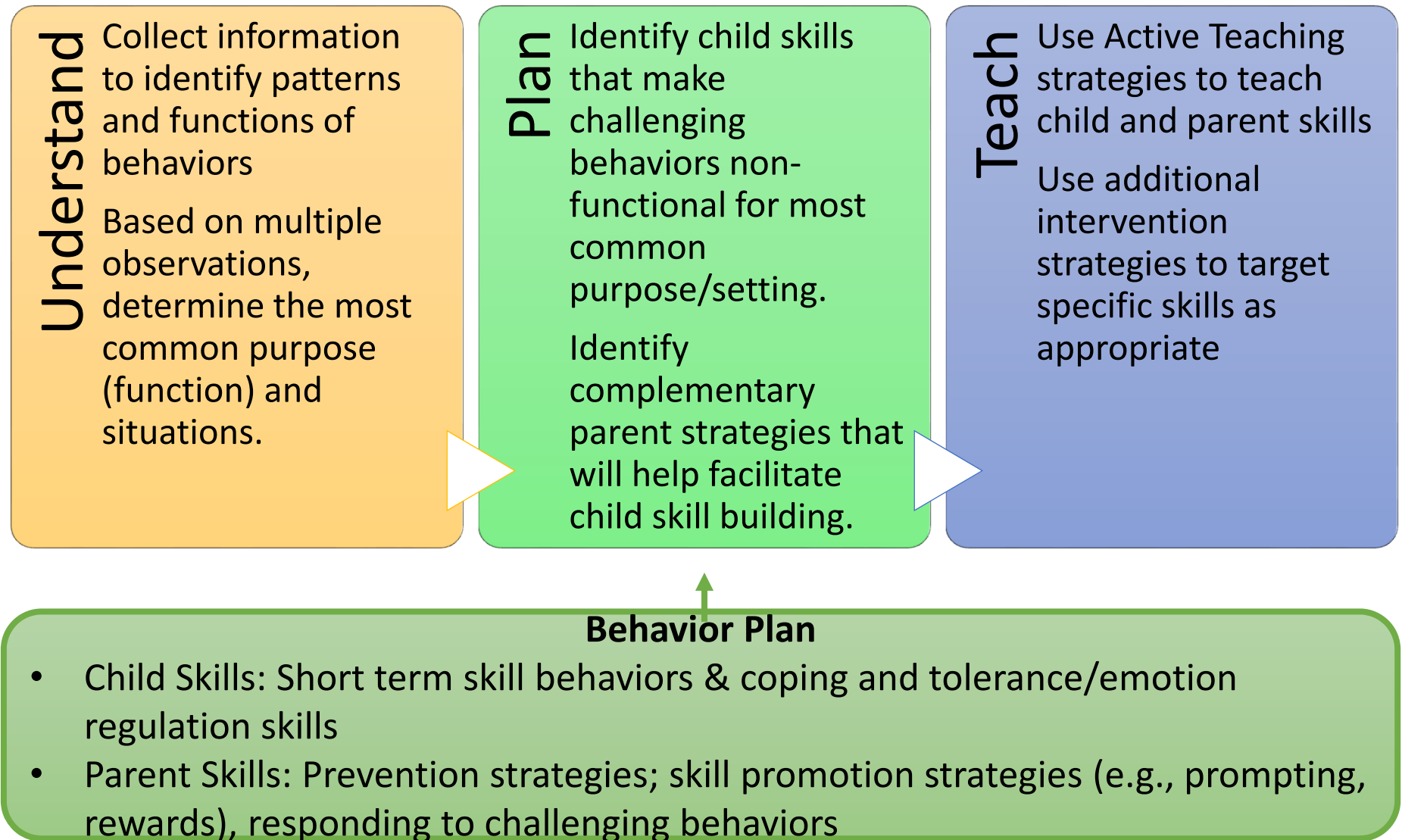
# AIM HI Framework



# AIM HI Framework

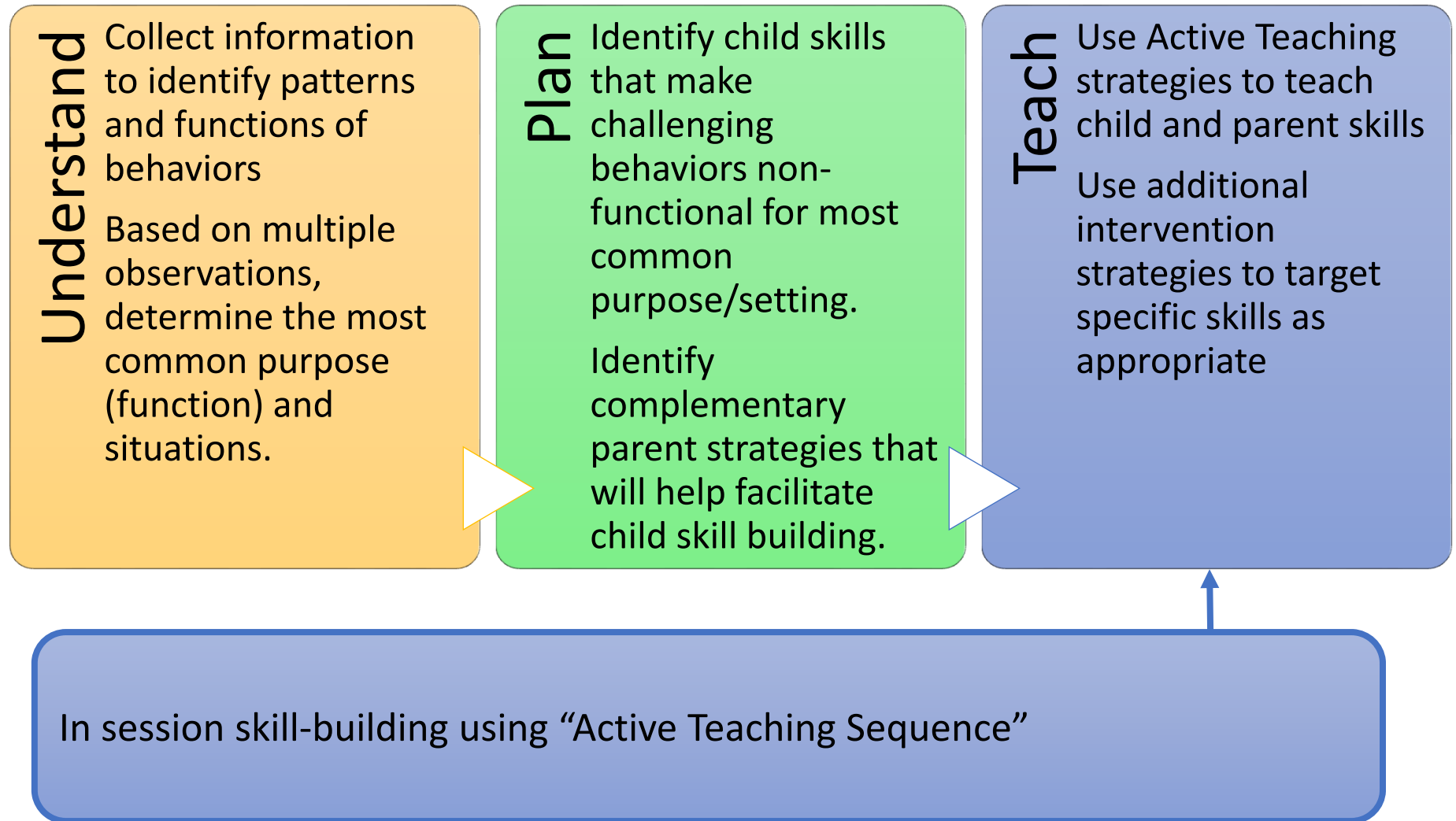


# AIM HI Framework





# AIM HI Framework



# AIM HI Protocol

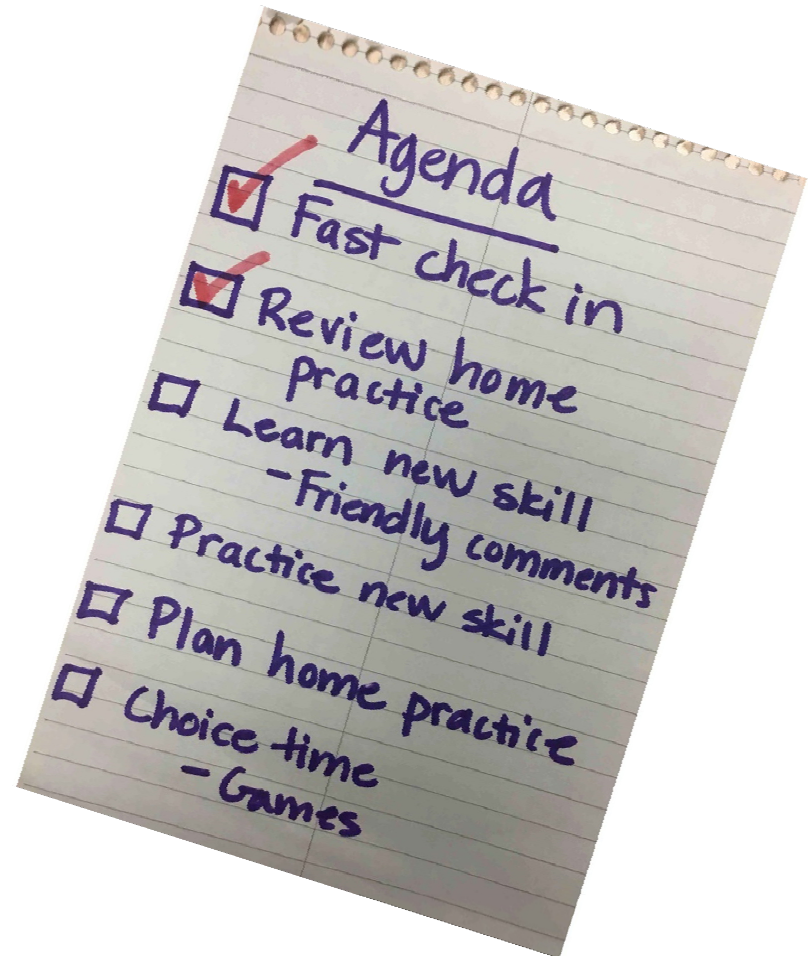
Phase	AIM HI Protocol Steps	Within-Session Elements
Treatment Planning	Integrate Assessment Information	Structuring sessions for skill-building and engagement <ul style="list-style-type: none"> <li>Schedules, visual/written materials</li> </ul>
	Collaborative ASD Psychoeducation	
	Complete Behavior Tracking	
	Develop Behavior Plan	
	Develop Parenting Plan	
Active Teaching	Develop Parenting Strategies	Engaging parents and children <ul style="list-style-type: none"> <li>Collaboration/active involvement (parents)</li> <li>Motivational strategies (children)</li> <li>Preparing to teach new skills</li> </ul>
	Teach Alternative Skill(s) to Child	Active teaching with parents and children <ul style="list-style-type: none"> <li>Modeling, practice-with-feedback, reinforcement, between-session practice</li> </ul>
	Promote Generalization of Alternative Skill(s)	
	Teach Additional Alternative Skills to Child (as indicated)	
Evaluating Progress	Review Treatment Progress	
	Develop Plan for Next Steps	

**Adapting Psychotherapy/Counseling for ASD**

# Structuring Sessions: *Session Schedule*

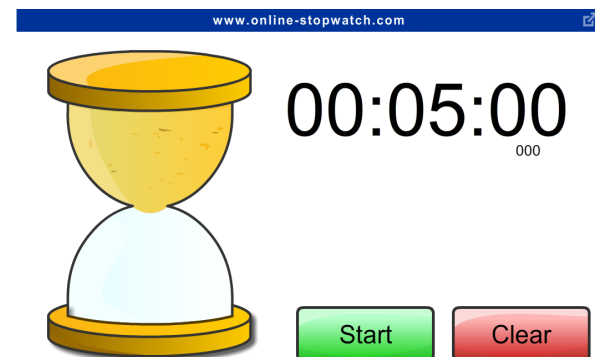
## AIM HI Session Schedule

- Review what the child/parent did between sessions
- Teach parent or child skills using “Active Teaching” strategies
- Summarize session and plan between-session practice
- End with motivating activity



# Structuring Sessions: *Environmental Modifications*

**Maximize structure and predictability**



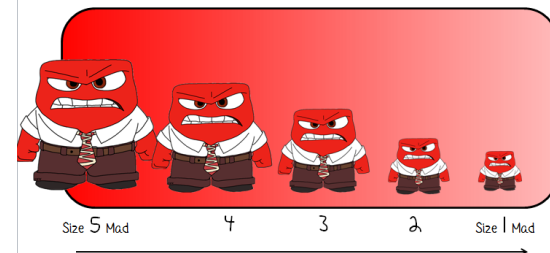
# Structuring Sessions: *Environmental Modifications*

Maximize structure and predictability

Use visual aids to make abstract concepts concrete



Sizes of Mad Feelings



# AIM HI Protocol

Phase	AIM HI Protocol Steps	Within-Session Elements
<b>Treatment Planning</b>	Integrate Assessment Information	Structuring sessions for skill-building and engagement <ul style="list-style-type: none"> <li>Schedules, visual/written materials</li> </ul>
	Collaborative ASD Psychoeducation	
	Complete Behavior Tracking with Parents	
	Develop Behavior Plan	
<b>Adapting Psychotherapy/Counseling for ASD</b>		Engaging parents and children <ul style="list-style-type: none"> <li>Collaboration/active involvement (parents)</li> <li>Motivational strategies (children)</li> <li>Preparing to teach new skills</li> </ul>
<b>Active Teaching</b>	Teach Alternative Skill(s) to Child	Active teaching with parents and children <ul style="list-style-type: none"> <li>Modeling, practice-with-feedback, reinforcement, between-session practice</li> </ul>
	Promote Generalization of Alternative Skill(s)	
	Teach Additional Alternative Skills to Child (as indicated)	
<b>Evaluating Progress</b>	Review Treatment Progress	
	Develop Plan for Next Steps	

# Engaging Parents and Children: *Motivating Children*

Incorporate child preferred activities, topics, and interests

Share control of materials and/or activities with the child



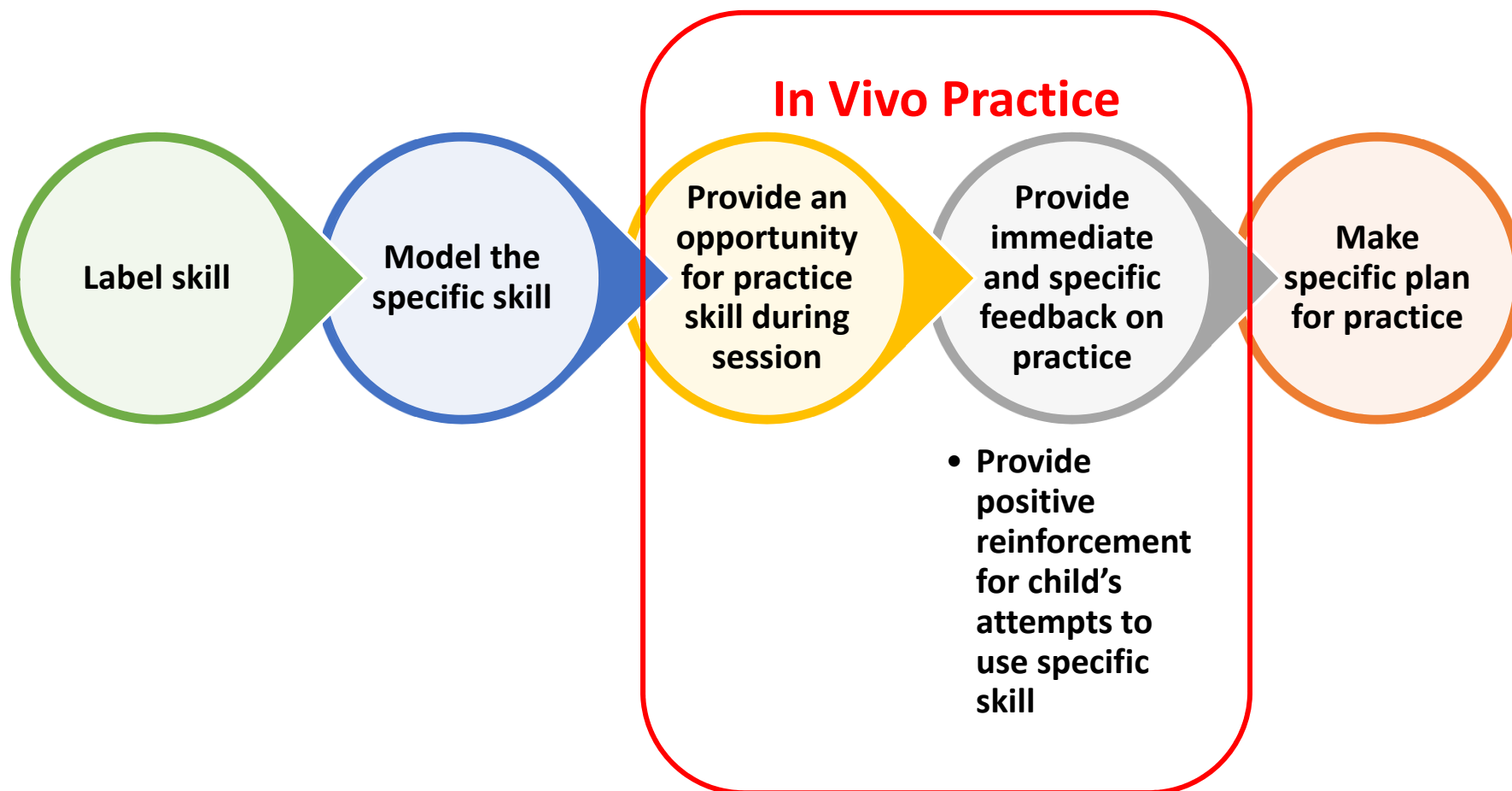


# AIM HI Protocol

Phase	AIM HI Protocol Steps	Within-Session Elements
<b>Treatment Planning</b>	Integrate Assessment Information	Structuring sessions for skill-building and engagement <ul style="list-style-type: none"> <li>Schedules, visual/written materials</li> </ul> Engaging parents and children <ul style="list-style-type: none"> <li>Collaboration/active involvement (parents)</li> <li>Motivational strategies (children)</li> <li>Preparing to teach new skills</li> </ul>
	Collaborative ASD Psychoeducation	
	Complete Behavior Tracking with Parents	
	Develop Behavior Plan	
	Develop Active Teaching Plan	
<b>Active Teaching</b>	Teach Parent Strategies	Active teaching with parents and children <ul style="list-style-type: none"> <li>Modeling, practice-with-feedback, reinforcement, between-session practice</li> </ul>
	Teach Alternative Skill(s) to Child	
	Promote Generalization of Alternative Skills	
<b>Evaluating Progress</b>	Review Treatment Progress	
	Develop Plan for Next Steps	

## Adapting Psychotherapy/Counseling for ASD

# “Active Teaching” Sequence



# Previous AIM HI Research Findings



## Training success!

- A vast majority of therapists successfully *complete AIM HI certification process*

## Useful and effective!

- Therapists view AIM HI as useful and effective for children with *(and without) ASD*
- Parents are more engaged in sessions

## Changing practice!

- Therapists trained in AIM HI use more evidence-based strategies
- *Therapists individualize AIM HI* for child/family and service setting characteristics

## Improved child outcomes!

- Children's whose therapists received AIM HI training had *greater improvements in behaviors* compared to therapists delivering usual care

# Process of Learning AIM HI (it takes at least 6 months)

## Introductory Workshop

- Understanding challenging behaviors in ASD
- Introduction to AIM HI framework & protocol steps
- Structuring session for engagement and skill building
- Start to plan how to apply concepts to AIM HI case

## Structured Consultation Series (11 sessions)

- In depth coverage of protocol steps
- Case-specific discussions linked to each protocol step
- Exposure to AIM HI to different child profiles through group

## Deliver AIM HI to Case with Guidance & Performance Feedback from Trainer

- Guidance on applying AIM HI to individual case
- Collaboration on the targets of intervention based on behavior patterns
- Feedback based on video and protocol form review
- Master concepts and application (by the end of the 6 months)

# Considering Fit of AIM HI Training

- *Currently* serving children with ASD in psychotherapy/counseling?
- Program capacity to delivery EBP for this population and participate in in-depth training?
- Therapists/counselors interest in receiving EBP training?

Visit [www.teamsASDstudy.org](http://www.teamsASDstudy.org)  
for more information on AIM HI training  
through “TEAMS” research study

# Acknowledgements

- Participant partners
  - Parents
  - Therapists
  - Program leaders
- Community partners
- Co-investigators
- TEAMS Research Staff
- NIMH

